

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$55.00	<input type="checkbox"/> \$110.00
2 months	<input type="checkbox"/> \$190.00	<input type="checkbox"/> \$390.00
3 months	<input type="checkbox"/> \$435.00	<input type="checkbox"/> \$890.00
4 months	<input type="checkbox"/> \$680.00	<input type="checkbox"/> \$1,390.00

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.
- ☐ Extension fee due with this Request _____.
- ☒ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEEES FOR CLAIMS:

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	124	-	74	=	50	x	\$18.00	\$900.00
Independent Claims	6	-	4	=	2	x	\$84.00	\$168.00
Multiple Dependent Claims	\$280	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$1,068.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28. If applicable, Verified Statement must be attached.								\$0.00
TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH								\$1,068.00

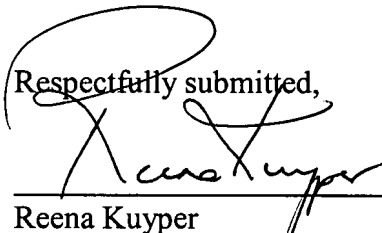
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. **50-1636** in the amount of **\$1,068.00**.

☒ The Commissioner is authorized to charge Deposit Account No. **50-1636** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **50-1636**.

Dated: 6/21/02

Respectfully submitted,

By:


Reena Kuyper
Registration No. 33,830

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